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In the United States Patent and Trademark Office

Appn. Number: 10/017,676

Appn. Filed: 12/14/2001

Applicant(s): Shahram Abdollahi-Alibeik, Mayur Joshi

Appn. Title: High-Speed Low-Power CAM-based Search Engine

Examiner/GAU: Bataille, Pierre-Michel / 2186

March 16, 2005

At: Stanford, CA

Amendment to Place the Application in Condition for Allowance

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

In response to the Office Letter mailed December 17, 2004, applicants request that the above application be amended as follows:

CLAIMS: Request for amendments to the claims begins on page 2 of this amendment.

REMARKS begin on page 8 of this amendment.

PTO/SB/21 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/017,876	
	Filing Date	Dec. 14, 2001	
	First Named Inventor	Abdollahi-Alibeik, Shahram	
	Art Unit	2186	
	Examiner Name	Batalie, P.	
Total Number of Pages in This Submission	9	Attorney Docket Number	

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<input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name			
Signature			
Printed name	Shahram Abdollahi-Alibeik		
Date	3/18/2005	Reg. No.	

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Date	3/18/2005

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